(Marco Jimenez)

PTO/SB/22 (12-04)
Approved for use through 7/31/2006, OMB 0651-0031
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MENTA RAIL		EXTENSION OF TIME UNDER S FY 2005 o the Consolidated Appropriations Act,	Docket Number (Optional) 490962001000									
	Application Number	per 09/447,837	7	Filed November 23, 1999								
	For METHOD A	For METHOD AND OBJECTIVE LENS FOR SPECTRALLY MODIFYING LIGHT FORAN ELECTRONIC CAMERA										
	Art Unit 261:	2		Examiner .	James M. Hannett							
	identified application	This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.										
	The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):											
			<u>Fee</u>	Small Entity Fee								
		month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00							
	Two r	months (37 CFR 1.17(a)(2))	\$450	\$225	<u> </u>							
	Three	e months (37 CFR 1.17(a)(3))	\$1020	\$510	\$							
	Four	months (37 CFR 1.17(a)(4))	\$1590	\$795	\$							
	Fiver	months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$							
	A check in Payment by The Directo	Deposit Account Number O3-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number										
		attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR			•							
	1	A 1		44,197 May	25, 2005							
		Signature			Date							
		Glenn M. Kubota			(213) 892-5752							
		Typed or printed name	Teleph	none Number								
		NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
	Total of	forms are subm	nitted.									
05/31/2005 MAHMEI 01 FC:1251	120.00 DA	09447837										
		this correspondence is being deposited we ressed to: MS AF, Commissioner for Pate										

below.

Dated: May 25, 2005

PTO/SB/17 (12-04v2)
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Effe		Complete if Known									
Fees pursuant to the Conso	18). A	Application Number 09)9/447,837							
FEE TRANSMITTAL				iling Date	Date November 2		, 1999				
				irst Named Inv	entor	Iain A. NEIL et al.					
For FY 2005				xaminer Name		James M. Har	mes M. Hannett				
Applicant claims small entity status. See 37 CFR 1.27				art Unit		2612					
TOTAL AMOUNT OF F	Α	Attorney Docket No. 49096200100			0						
METHOD OF PAYM	ENT (check all	that apply)									
Check Cred	it Card	Money Order	None	Other (please ident	ify):					
X Deposit Account	Deposit Account Num	ber: <u>03-1952</u> Depos	it Accoun	it Name:	Moi	rison & Foers	ter LLP				
For the above-io	dentified deposit	account, the Direct	tor is he	ereby authorize	ed to: (che	ck all that apply))				
x Charge fe	e(s) indicated be	low		Charge	e fee(s) inc	licated below, e	xcept for the	filing fee			
	Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION	I							~ ~ -			
1. BASIC FILING, SEAF	-										
	FILIN	G FEES	SEAR	CH FEES Small Entity	EXAMIN	IATION FEES	;				
Application Type	Fee (\$)	Small Entity Fee (\$) Fe	e (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)			
Utility	300		500	250	200	100					
Design	200	100	100	50	130	65		<u> </u>			
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	, 200	100	0	0	0	0					
2. EXCESS CLAIM FEE	s						S	mall Entity			
Fee Description							<u>Fee (\$)</u>	Fee (\$)			
Each claim over 20 (inc			•		50	25					
Each independent claim		ng Reissues)					200	100			
Multiple dependent clai		_					360	180			
Total Claims Ex	Total Claims		ee Pai			Jultiple Dependent Claims					
, 	× _	=		-	<u>Fe</u>	<u>e (\$)</u>	Fee Paid (\$)				
Indep. Claims Ex	tra Claims	Fee (\$) F	ee Pai	d (\$)				•			
-=_	× _	=									
3. APPLICATION SIZE			,								
If the specification and listings under 37 Cl											
sheets or fraction th						inity) for each a	idditional 30	÷			
Total Sheets	Extra Sheets			itional 50 or frac		f Fee (\$)	Fee Pa	id (\$)			
· · · · · · · · · · · · · · · · · · ·				ound up to a who			=				
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)											
	•	` •		,			400	00			
Other (e.g., late filin	g surcnarge): 1	201 Extension to	resp	onse within til	ist month		120	.00			
SUBMITTED BY	11/		Lo	egistration No.		T					
Signature	Al			egistration No. ttomey/Agent)	44,197	Telephone	(213) 892	-5752			
Name (Print/Type) Elenn	M. Kubota					Date	May 25, 2	2005			

Express Mail - EV506673984US